### FORM D

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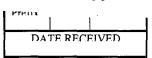
# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR ATTENTION





Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice. Name of Offering ( check if this is an amendment and name has changed, and indicate change) ARC Investment Partners, LLC \$3,000,000 Note and Unit Offering Filing Under (Check box(es) that apply): ☐ Rule 504 Rule 505 □ Rule 506 Section 4(6) ULOE New Filing Amendment-Final Type of Filing: A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change) ARC INVESTMENT PARTNERS, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number 620 Newport Center Drive, Newport Beach, CA 92600 949-200-4594 (Number and Street, City, State, Zip Code) Address of Principal Business Operations Telephone Number (if different from Executive Offices) ( ) Brief Description of Business **Investment Partnership** FINANCIAL

limited partnership, already formed Type of Business Organization other (please specify): Limited Liability corporation Company limited partnership, to be formed business trust Year ☐ Estimated Actual or Estimated Date of Incorporation or Organization: 0 3 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: D E CN for Canada; FN for other foreign jurisdiction)

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to this notice constitutes a part of this notice and must be completed.

	A.	BASIC IDENTIFIC	ATIO	N DATA						
2. Enter the information requ	ested for the followin	g:								
• Each promoter of the	issuer, if the issuer ha	s been organized with	in the p	ast five years;						
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply:	Promoter	Beneficial Owner	$\boxtimes$	Executive Officer	Director	General and/or Managing Partner				
Full Name										
ROSEMAN, ADAM										
Business or Residence Address	(Number and Street,	City, State, Zip Code)		<del></del>						
620 Newport Center Drive, N	•									
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)									
2 and 1 canno ( Date Hanne 111 oc, 11 1										
Business or Residence Address	(Number and Street	City State 7in Code								
Dusiness of Residence Address	s (Number and Street,	City, State, Zip Code)								
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)									
Business or Residence Address	(Number and Street,	City, State, Zip Code)								
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)									
Business or Residence Address	(Number and Street,	City, State, Zip Code)								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial		Executive	☐ Director	General and/or				
		Owner		Officer		Managing Partner				
Full Name (Last name first, if i	ndividual)									
Business or Residence Address	(Number and Street,	City, State, Zip Code)								
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)										
Business or Residence Address	(Number and Street,	City, State, Zip Code)								
	(Use blank sheet, or	copy and use additiona	l copie	s of this sheet,	as necessary)					

B. INFORMATION ABOUT OFFERING													
1. Has t	the issuer so	old, or does	the issuer i	ntend to se	ll, to non-a	ccredited ir	nvestors in t	his offering		•••••	Yes	No ⊠	
2. What	t is the mini	mum inves	stment that		o in Appene epted from			g under UL	OE		\$25,000		
3. Does the offering permit joint ownership of a single unit?											Yes	No ⊠	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											; ·		
Full Nar	Full Name (Last name first, if individual)												
Business	s or Resider	nce Addres	s (Number	and Street,	City, State,	Zip Code)							
Name of	f Associated	l Broker or	Dealer										
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	·s						
(Check	"All States	" or check	individual	States)	••••••	•••••				••••••		All States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Nar	ne (Last na	me first, if	individual)										
Busines	s or Resider	nce Addres	s (Number	and Street,	City, State,	Zip Code)						***************************************	
Name of	f Associated	l Broker or	Dealer										
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	'S						
(Check	"All States	" or check	individual	States)	••••••		•••••		•••••			All States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
			individual)		<u> </u>	<u> </u>						<del> </del>	
Busines	s or Resider	nce Addres	s (Number	and Street,	City, State,	Zip Code)							
Name or	f Associated	d Broker or	· Dealer										
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	·s						
(Check	"All States	s" or check	individual	States)								All States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

### 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \infty and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt\*..... 3,000,000 3,000,000 \* Units, each consisting of an LLC membership interest and a \$25,000 promissory note Equity— Warrants to purchase Common Stock Common ☐ Preferred Convertible Securities: Partnership Interests \$ Other (Specify ). Total..... 3,000,000 3,000,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Aggregate Number Dollar Amount Investors Of Purchases Accredited Investors ..... 3,000,000 \$ 0 \$ Non-accredited Investors N/A 0 Total (for filings under Rule 504 only)..... \$ N/A Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Security Type of offering \$ Amount Sold Rule 505 Regulation A Rule 504..... Total ..... 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... 0 Printing and Engraving Costs \$ 10,000 Legal Fees (for issuer's counsel) 0 Accounting Fees 0 \$ Engineering Fees ..... 0 Sales Commissions (specify finders' fees separately)(if placement agents are engaged) 0 Other Expenses (identify) - Investor's Counsel Fees П 10,000 Total

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES	S AND L	SE OF PRO	OCEEDS		
b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C gross proceeds to the issuer."	- Question 4.a. This difference i	is the "a	djusted		\$	2,990,000
5. Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total gross proceeds to the issuer set forth in response to Pa						
			Payments to Officers, Directors & Affiliates			Payments To Others
Salaries and fees		□ \$	0	□	\$	10,000
Purchase of real estate		<b>\$</b>	0	□	\$	0
Purchase, rental or leasing and installation of machinery	and equipment	□ \$	0	□	\$	0
Construction or leasing of plant buildings and facilities		□ \$	0	□	\$	0
Acquisition of other businesses (including the value of se Offering that may be used in exchange for the assets or so pursuant to a merger)	ecurities of another issuer	□ \$	0		\$	0
Repayment of indebtedness			0		\$	0
Working capital (includes product licensing and advertisi			0		\$	2,990,000
Other (specify):	ing uno macroting,				\$	
Onto (specify).					Ψ	
		□ \$	0		\$	0
Column Totals		□ \$	0	🛛	\$	2,990,000
Total Payments Listed (column totals added)			□ \$	0.0	0	No
D	. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed by a following signature constitutes an undertaking by the issuer of its staff, the information furnished by the issuer to any	the undersigned duly authorized pure to furnish to the U.S. Securitie	s and Ex	change Com	ımission, ı	ıpon	
Issuer (Print or Type) ARC INVESTMENT PARTNERS, LLC	Signature Adden The			Date August 1	, 20	05
Name of Signer (Print or Type) ADAM ROSEMAN	Title of Signer (Print or Type) PRESIDENT					
Intentional misstatements or omissions of	ATTENTION fact constitute federal crit	minal '	violations	. (See 1	8 L	J.S.C. 1001)

	E. STATE SIGNATURE						
1.	. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?						
	See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, D (17 CFR 239.500) at such times as required by state law.	a notice or	Form				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnist to offerees.	hed by the	issuer				
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the a exemption has the burden of establishing that these conditions have been satisfied.						
	he issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on indersigned duly authorized person.	its behalf	by the				

## Instruction:

Issuer (Print or Type)

ADAM ROSEMAN

Name of Signer (Print or Type)

ARC INVESTMENT PARTNERS, LLC

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

PRESIDENT

Signature

Title of Signer (Print or Type)

Date

August 2, 2005

## APPENDIX

1	ļ ļ	2	3  Type of security	4					5 ification ite ULOE
	non-acc investor	to sell to credited s in State – Item 1)	and aggregate offering price offered in state (Part C – Item 1)		(if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No		Number of Accredited Investors	Accredited Non-				No
AL									
AK									
AZ									
AR								L	
CA		X	\$3,000,000 Notes and LLC Membership Units	3	\$3,000,000	0			Х
со									
СТ									_
DE									
DC									
FL									,
GA	· · · · · · · · · · · · · · · · · · ·								
HI								_	
ID									
IL									
IN									
IA									
KS									
KY									
LA									
МЕ									
MD									
MA									
MI									
MN			,						
MS									

## APPENDIX

1	Intend non-acc	to sell to credited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No		Number of Accredited Investors	ccredited Non-				No
МО									
MT		ļ							
NE									
NV									
NH									
NJ					-				
NM									
NY									
NC									
ND									
ОН									
ок									
OR									1
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI									
WY									
PR									

EXHIBIT A											
Check Box(es) that Apply:	Promoter	Beneficial Owner	⊠ Exe	ecutive Director	General and/or Managing Partner						
Full Name (Last name first, if	individual)										
ADAM ROSEMAN											
Business or Residence Address (Number and Street, City, State, Zip Code)											
620 Newport Center Dri	ve, Newport Beac	n, CA 92600									
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Ex-	ecutive Director	General and/or Managing Partner						
Full Name (Last name first, if	individual)										
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Exe	ecutive Director	General and/or Managing Partner						
Full Name (Last name first, if	individual)	<del></del>									
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Exe	ecutive Director	☐ General and/or Managing Partner						
Full Name (Last name first, if	individual)										
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Exe	ecutive Director	☐ General and/or Managing Partner						
Full Name (Last name first, if	individual)										
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Exe	ecutive Director	General and/or Managing Partner						
Full Name (Last name first, if	individual)										
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Exe	ecutive Director	☐ General and/or Managing Partner						
Full Name (Last name first, if	individual)										
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)									